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Substitute for form 1449/PTO	Complete if Known			
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INFORMATION DISCLOSURE	Filing Date March 9, 2001			
STATEMENT BY APPLICANT	First Named Inventor	WHITSON, Debi		
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(Use as many sneets as necessary)	Examiner Name	PORTER, Rachael L.		
Sheet 1 of 1	Attorney Docket Number	36357		

		NON PATENT LITERATURE DOCUMENTS	
Examiner Initials*	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>
		MCDONALD, CJ, The Barriers to Electronic Medical Record Systems and How to Overcome Them, Journal of the American Medical Informatics Association, May-June 1997	
		WALSH, STEPHEN H., The clinician's perspective on electronic health records and how they can affect patient care, May 2004	
Evaminar	1	Data	

Examiner	Date	
Signature	Considered	

<sup>\*</sup>EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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